Location: Sacramento City Unified School District

ATTENDEES:

Name Organization/Title

Elizabeth Touhey
 Pam Wagner
 DHS, Section Chief, Medi-Cal Benefits Branch, Co-Chair
 Los Angeles Unified School District (LAUSD), Co-Chair

Barbara Schultz DHS, Medi-Cal Benefits Branch
 David Bass DHS, Medi-Cal Benefits Branch
 Vivian Sultan DHS, Medi-Cal Benefits Branch

6. Cathy Bray Los Angeles (LA) County Office of Education (COE)

7. John DiCecco LAUSD

8. Mary Lou Lutz San Bernardino City Unified School District (USD)

Cynthia White-Piper San Bernardino City USD
 Cathy Bennett Sacramento City USD
 Sue Hamblin Stanislaus COE

12. Susan Bier Konocti USD
13. Greg Englar Sonoma COE
14. Laura Baynham Mendocino COE
15. Judy Holzapfel Glenn COE

16. Rudolph Ramirez
17. Judy Dorn
18. Susan Ellyson
Fresno USD
Fresno COE
Madera COE

19. Robert Powell California Speech and Hearing Association

20. Kevin Harris
21. Bisim Lee
22. Gloria Eng
Navigant Consulting, Inc.
Navigant Consulting, Inc.
Navigant Consulting, Inc.

Handouts

Each participant received a folder with copies of the following: Agenda, National Procedure Code Schedules (Attachments A, B, and C), Part 2 Table of Contents – LEA Provider Manual, Physical Therapy Services Section (Updated Draft), Letter from the Centers for Medicare and Medicaid Services (CMS) regarding targeted case management, Potential New Services Questionnaire and Instructions, and Navigant Consulting's PowerPoint presentation.

Purpose

The meeting was convened by DHS in partnership with LAUSD. The purpose of the Workgroup is to improve the LEA Program. The emphasis of the meeting is to strategize various goals and activities aimed at enhancing Medi-Cal services provided on school sites and access by students to these services, while increasing federal reimbursement to LEAs for the cost of providing these services.

Introduction of New DHS Staff

David Bass and Vivian Sultan were recently hired by Medi-Cal Benefits Branch (MBB) to work on the LEA and Targeted Case Management Programs.

Provider Annual Report

The 2003-2004 Annual Report was recently mailed to LEA providers. Workgroup participants requested that the due date of the report be revised from October 30 to December 15, 2004 to allow providers to meet with their local collaboratives. In the future, MBB plans to work with Provider Enrollment to make revisions to the Annual Report, including the removal of information that is no longer relevant. Workgroup participants would like to maintain accountability for re-investment of Medi-Cal reimbursement in future reports.

Action:

What: Revise the due date of the 2003-2004 Annual Report and post an updated copy

of the report on the LEA website. Send an e-mail to the LEA Workgroup, Local Educational Consortiums, and Local Governmental Agencies after the updated

copy is posted.

Who: Navigant Consulting and DHS

When: ASAP

Action:

What: Review the content of the Annual Report with Provider Enrollment and make

revisions, as appropriate. Discuss the feasibility of on-line report submittal.

Who: DHS

When: Prior to mailing the 2004-2005 Annual Report to providers

Annual Report to the Legislature

MBB is reviewing the 2003 Annual Report to the Legislature, which summarizes information that has been presented in previous Workgroup meetings. The report is due to DHS Legislative and Government Affairs by January 1st. Senate Bill 231 does not specify a date when the Annual Report is due to the Legislature. The Workgroup requested that the Annual Report be released as soon as possible to have an official document of LEA Program accomplishments. Navigant Consulting prepared a rate study and implementation chronology for DHS and LAUSD that may be helpful in describing the status of the legislation to other parties until the Annual Report is released.

Action:

What: E-mail the chronology to the Workgroup.

Who: DHS

When: Not Specified

Data Match System

MBB met with personnel from Information Technology Systems Division (ITSD) to discuss the data match system. Medi-Cal eligibility in the system has not been reviewed since the inception of the LEA Program. Valid aid codes used in the data match system must match those in the claims processing system. MBB will research valid aid codes, including foster care and adopted children, for the LEA Program. As new Medi-Cal aid codes are established, MBB will be notified by ITSD to identify codes that are valid for the LEA Program.

Action:

What: Prepare a list of additional Medi-Cal aid codes for ITSD and EDS to update

eligibility codes for the LEA Program. Send an e-mail to the Workgroup after the

changes to the Medi-Cal Eligibility Data System are completed.

Who: DHS and Navigant Consulting

When: ASAP

State Plan Amendment (SPA) 03-024

Legal reviewed the cover letter, Attachment 3.1-A, and Attachment 3.1-B of the SPA, and revisions to these documents have been substantially completed. Questions about the services provided by Cal-SAFE and other funding sources to pregnant and parenting students were raised by Legal. Workgroup participants stated that Cal-SAFE services are generally provided in separate classrooms, and providers could set up a protocol to prevent duplicate billing of these services to the LEA Program, if necessary. Legal still needs to review the rate methodology and cost reconciliation process in Attachment 4.19-B.

Action:

What: Notify the Workgroup by e-mail after the SPA has been re-submitted to CMS.

Who: DHS

When: After the SPA has been re-submitted

Implementation of SPA 03-024

Navigant Consulting and MBB met with the Office of HIPAA Compliance (OHC), Payment System Division (PSD), and EDS to discuss methods of identifying practitioner type. Modifiers will be used instead of taxonomy codes, which will reduce implementation time and simplify billing. Requests for additional modifiers for audiologists and counselors have been submitted to OHC to be reviewed and sent to CMS for approval. The information in the National Procedure Code Schedules (Attachment A, B, and C) will be used in the System Design Notice, the set of instructions that identifies changes to the claims processing system. The Workgroup expressed concern that other providers will have difficulty understanding the new billing

structure conceptually. Training and billing information will be provided as part of the implementation process.

The retroactive billing period for new claims submitted after new billing codes have been implemented by EDS is 12 months. DHS is researching the retroactive billing period for re-submitted claims as well as the waiver of payment reductions based on the date of service.

Provider Manual Revisions

MBB and Navigant Consulting met with the Publications Group at PSD and EDS to discuss the format and organization of the LEA Provider Manual. LEA-specific information is currently contained in three sections which are accessible from the Part 2 Table of Contents. Separate sections for each service type (physical therapy, nursing, transportation, etc.) will be added. Separate sections may also be added for other topics that are currently in the general information section ("loc edu"). Navigant Consulting is currently in the process of re-organizing and making edits to the "loc edu" section. The draft of the physical therapy services section has been updated to reflect feedback provided by the Workgroup and the Publications Group. The Workgroup suggested that prescription requirements for physical therapy be added to the tables on the last page of this section. Another suggestion was to add examples of service forms in the manual. If added, the forms would have to be approved by Legal and would not be mandatory in order to give LEAs the flexibility of developing their own templates.

Action:

What: Send a preliminary draft of the "loc edu" section to the Provider Manual sub-

workgroup to review proposed organizational and format changes (content

changes will not be completed in this draft).

Who: Navigant Consulting and DHS

When: Approximately two weeks after the Workgroup meeting

Speech-Language Equivalency

DHS sent a letter with a brief prepared by the California Commission on Teacher Credentialing (CTC) to CMS. The letter requested equivalency for credentialed speech practitioners and a response within 60 days. If CMS does not approve the request, providers will work with state legislators to enact legislation to "grandfather" credentialed speech practitioners as licensed personnel on a retroactive basis only. Newly hired speech practitioners will have to be licensed by the state.

Action:

What: Send the letter and CTC brief to the Workgroup and notify them by e-mail of the

response from CMS regarding the equivalency request.

Who: DHS

When: Not Specified

Communications to Providers

Navigant Consulting prepares monthly status reports for DHS. These reports will be shared with the Workgroup to communicate monthly progress on Senate Bill 231 implementation.

Navigant Consulting recently prepared a mailing to send the Potential New Services Questionnaire to all providers. The contact/address list for this mailing consolidated information from mailing lists obtained from Provider Enrollment and DHS training in November 2003. The provider contact/address list will be updated with information, including e-mail addresses, from competed questionnaires to be used in future communications with LEA providers.

Action:

What: Send copies of the monthly status reports prepared by Navigant Consulitng to

the Workgroup.

Who: DHS

When: Not Specified

Targeted Case Management (TCM)

In preparation for the TCM meeting scheduled in September, DHS sent proposed SPA language to CMS for review. CMS responded that it could not approve the SPA as written, and the meeting was not held. Issues included duplication of coverage, target population coverage, and recipient freedom of choice of agencies. CMS recently disapproved another California TCM SPA for similar reasons and offered the state "technical assistance" in re-writing it. The LEA TCM SPA will be placed on hold until the issues with the other TCM SPA have been resolved with CMS.

Free Care Requirements

CMS has filed for re-consideration of the Oklahoma decision regarding free care, and it may be potentially another 60 days before the final administrative decision is issued. CMS has not revised its position on free care as a result of the Oklahoma decision.

Potential New Services

The potential new services questionnaire was recently mailed to all LEA providers to identify services that are provided in school settings and the providers that render these services. The information from completed surveys will be used to select an unbiased sample of providers for cost survey purposes. If the number of responses is not significant, a contingency plan may be necessary.

Since interpreter services are claimable in MAA, potential duplicative payments may be an issue with CMS. The Workgroup recommended that interpreter services provided to facilitate a direct service, such as physical therapy, be billed in the LEA Program.

Administrative interpreter services, such as explaining LEA services to a parent, should be claimed in MAA.

Legal reviewed the proposed changes to the LEA Provider Manual regarding wheelchair van transportation. Since the intent of the regulations is that the recipient must be transported in a wheelchair to be reimbursed, the regulations must be revised prior to expanding the type of transportation that may be billed. Proposed regulations for transportation will be included in the regulations package prepared after the SPA is approved. CMS noted at the National Alliance for Medicaid in Education (NAME) conference that school-based Medicaid programs have varying interpretations of what constitutes "specialized transportation". CMS made no commitment regarding when additional guidance would be offered. Transportation provided to special education students will be discussed during field visits to LEA providers in November and December.

Action:

What: Research education regulations regarding special education transportation.

Who: Navigant Consulting

When: Not Specified

Third Party Liability

LEA providers continue to receive notices from third party insurers that indicate the state is billing these insurers for LEA services. LAUSD recently sent a letter to DHS with some of the notices attached to seek clarification of third party billing by the state. MBB has not yet seen a copy of this letter.